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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/897,910			ing Date 03/2001	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY	
FOR NUMBER FILED			.ED NU	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)		
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A		1	N/A		
	SEARCH FEE (37 CFR 1.16(k), (f),		N/A		N/A		N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(a), (p),	E or (q))	N/A		N/A		N/A			N/A		
	FAL CLAIMS CFR 1.16(i))		minus 20 = *				x \$ =		OR	x \$ =		
	EPENDENT CLAIN CFR 1.16(h))	IS	minus 3 = *			1	x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	If the specification and drawings exc sheets of paper, the application size is \$250 (\$125 for small entity) for ea additional 50 sheets or fraction there 35 U.S.C. 41(a)(1)(G) and 37 CFR 1									
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))]			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL		
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY												
AMENDMENT	02/10/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	• 10	Minus	20	= 0		x \$ =		OR	X \$52=	0	
	Independent (37 CFR 1,16(h))	• 2	Minus	3	= 0	1	x \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))											
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
		(Column 1)		(Column 2)	(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())	*	Minus	**	-	1	x \$ =		OR	x \$ =		
	Independent (37 CFR 1.16(h))	*	Minus	***	=		x \$ =		OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))					ı			l			
Ą	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** 11	"If the othry in column 1 is less than the entry in column 2, write "o" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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